Segment 2: **TRUTH and CONSEQUENCES** 10:19 minutes

Teens talking about the effects of drinking, smoking, and drugs on developing babies.

**Learning Objectives:**

1. Understand problems associated with drinking alcohol, smoking, and doing drugs: legal consequences as well as effects on brain development, behavior, and overall health.

2. State how smoking, drinking, and drugs can have negative effects on the health of developing babies.

3. List resources for additional information on the topic.

**Topics Addressed in Segment 1:**

- Alcohol
- Smoking
- Drugs
Segment 2, Topic 1  TRUTH and CONSEQUENCES: Alcohol

KEY MESSAGES

Most Commonly Abused Drug is Alcohol

• Alcohol is the number one drug of choice for children and adolescents.
• Youth are more likely to use alcohol than tobacco or illicit drugs.
• People who begin drinking in their teens are much more likely to become addicted than those who begin at 21.

Alcohol Affects Your Brain and Your Body

• Drinking alcohol can lead to loss of coordination, poor judgment, memory lapses, and even blackouts.
• Alcohol can damage every organ in your body.

Alcohol Leads to Risky Behaviors

• Drinking alcohol can lead to risky behaviors, such as driving when you shouldn’t, or having unprotected sex.
• Teens who use alcohol are 7 times more likely to have sex than those who don’t.
• Teens are more likely to have unprotected sex when using alcohol or drugs.
• Most teens believe their peers fail to use protection when they are under the influence of alcohol or drugs.
• Having sex without protection can lead to Sexually Transmitted Infections (STIs).
• Having sex without protection can lead to pregnancy.

Alcohol Can Kill You

• Drinking large amounts of alcohol at one time or very rapidly can cause alcohol poisoning, which can lead to coma or even death.
• Driving and drinking can be deadly.
• Alcohol is the leading cause of death in people under 21.
• More than 1,000 college students are killed annually in alcohol-related incidents.
• College students’ drinking is a factor in thousands of injuries, assaults on students and cases of sexual assault or date rape.

Drinking Alcohol Impairs Sexual Performance in Men

• Heavy alcohol use by the male can lower the level of the male hormone testosterone, leading to low sperm counts and, occasionally, to infertility.
• Men who drink are at risk for impotence.
Alcohol Consumed During Pregnancy Hurts Babies

- Alcohol use during pregnancy may increase the risk of problems to the baby, including being born small, early, and having birth defects including mental retardation.
  
  > Even light drinking may harm the baby. No level of alcohol during pregnancy has been proven safe. This includes beer, wine, and liquor.
  
  > Drinking alcohol at any stage of pregnancy can affect the baby's brain.

- When a pregnant woman drinks, alcohol passes swiftly through the placenta to her baby.
  
  > In the unborn baby's immature body, alcohol is broken down much more slowly than adult's body.
  
  > As a result, the alcohol level of the baby's blood can be even higher and can remain elevated longer than the level in the mother's blood.
  
  > This sometimes causes the baby to suffer lifelong damage.

- Fetal Alcohol Syndrome (FAS) is one of the most common known causes of mental retardation, and the only cause that is entirely preventable.
  
  > The effects of FAS last a lifetime.
  
  > Prenatal alcohol exposure is a leading cause of mental retardation in the US – and is entirely preventable.
  
  > Babies born to mothers who drink alcohol may have FAS. Children with FAS may:
    - Be born small
    - Have problems eating and sleeping
    - Have problems hearing and seeing
    - Have problems paying attention
    - Have trouble controlling their behavior
    - Need medical care all their lives

Alcohol Abuse and Safety: Messages for Teens

- Never operate a motor vehicle or other type of machinery while under the influence of alcohol or other drugs.

- If you or someone you are with is experiencing a medical emergency as a result of ingesting drugs or alcohol call 911.

- Do not be afraid of “getting in trouble.” If you don’t seek medical attention, you or your friend could suffer brain damage or die.

- Underage drinking (under 21) and using illicit drugs is illegal, and the consequences can be devastating. You could lose ability to apply for federal financial aid for college (Higher Education Act).

How to Get Help

- Discuss your concerns with a friend, parent, or health care professional.

- Ask your family and friends to help you stay away from alcohol.

- Avoid situations where drinking is encouraged.

- Seek help from a school nurse, community health clinic, or your doctor.

- Call Alcoholics Anonymous, listed in the local phone book

- Call the Alcohol Quit Line: 1-800-ALCOHOL (1-800-252-6465)
Note to Presenters

See additional information in the Chapter, “Self Esteem, Peer Pressure, and Stress Management.”

Sources of Data for this Chapter

March of Dimes  
[link: marchofdimes.com]

March of Dimes Team Youth  
[link: marchofdimes.com/youth]

National Campaign to Prevent Teen Pregnancy:  
“Sobering Facts on Alcohol and Teen Pregnancy”  
[link: teenpregnancy.org]

National Center on Addiction and Substance Abuse at Columbia University  
[link: casacolumbia.org]

National Institute on Alcohol Abuse and Alcoholism  
[link: niaaa.nih.gov]

Substance Abuse and Mental Health Services Administration  
[link: www.samhsa.gov]

References for Teens

Alcohol Quit Line  
1-800-ALCOHOL (1-800-252-6465)

March of Dimes Team Youth  
[link: marchofdimes.com/youth]

National Campaign to Prevent Teen Pregnancy:  
“Sobering Facts on Alcohol and Teen Pregnancy”  
[link: teenpregnancy.org]

Students Against Destructive Decisions (SADD)  
[link: sadd.org]

References for Parents and Professionals

March of Dimes (for parents and professionals)  
[link: marchofdimes.com]

Nacersano (Spanish)  
[link: nacersano.org]

National Campaign to Prevent Teen Pregnancy:  
“Sobering Facts on Alcohol and Teen Pregnancy”  
[link: teenpregnancy.org]

National Center on Addiction and Substance Abuse at Columbia University  
[link: casacolumbia.org]

National Institute on Alcohol Abuse and Alcoholism  
[link: niaaa.nih.gov]

Substance Abuse and Mental Health Services Administration  
[link: www.samhsa.gov]
Segment 2, Topic 1  TRUTH and CONSEQUENCES: Alcohol

EXCERPTS FROM VIDEO

Marcel: We see liquor as something we can’t have so we do it.

Brian: I don’t drink at all.

1. Marcel concludes that teens will drink because it is off limits. What do you think?

2. Brian, an athlete, is aware that some of his friends may be drinking and yet he doesn’t drink at all. How do you think he resists the peer pressure to drink?

3. What are some of the risks consequences of choosing to drink as a teen?

4. Why do you suppose some teens drink, in spite of the risks?

5. Do you know teens who drink?

Voice: Drinking lowers your inhibitions.

Dr Damus: Alcohol is one of the most common reasons for unintended pregnancy.

Shannon: Drinking in excessive amounts is not thinking of your future. And having an unplanned pregnancy is not thinking of your future.

1. What happens when your “inhibitions” are lowered?

2. Do you know teens who are or have been pregnant – or male teens who are parents to a child already? If so, do you think it’s possible the pregnant teens – and/or their boyfriends – were drinking when they got pregnant?

3. Do you know anyone – teen or adult – who is pregnant now and drinking alcohol?

4. What amount of alcohol do you think is safe for a pregnant woman to drink during pregnancy?

5. Why does how much you drink as a teen matter in the future, when teens become adults?
Lourdez Droz, NICU Mom: People used to say to me that I could have a wine cooler. But I never did – I didn’t trust it because I know mom’s who did drink while they were pregnant and their babies came out slower than other babies.

1. What do you think about Lourdez’s decision not to drink even a wine cooler?

2. What is Fetal Alcohol Syndrome?

3. What do you think it would be like to be a child who is developmentally delayed or mentally retarded?

4. What do you think it would be like to take care of (or baby-sit) a child who is developmentally delayed or mentally retarded?

5. Have you seen any movies or read any books that involve children who are born with birth defects, mentally retarded, or with other problems?
Activity: Drunk Driver

Time: 5-15 minutes

Purpose: To engage participants in a discussion about alcohol and responsibility.

Materials: None

Instructions: Describe a scenario where 3 teens are at a park, hanging out on a school night, and it’s starting to get dark. One of the teens (Chris) has been drinking a lot and is visibly drunk to the point where he can’t walk a straight line, a second teen (Jesse) has had a couple drinks but does not appear drunk, and the third teen (Pat) has not been drinking at all. Chris drove everyone to the park and has the keys to the car. Jesse states that it’s time to go home because they all have exams the next morning. Pat does not know how to drive. Each teen lives more than 5 miles from the park. Ask the participants to imagine that they are Pat and what they would do?

Discuss reactions to this activity.

Note: It is best to use names that don’t belong to any of the participants. Substitute different names in the scenario where appropriate.
### Activity: Teen Party

<table>
<thead>
<tr>
<th>Time:</th>
<th>10-20 minutes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Purpose:</td>
<td>To encourage participants to think about the potential consequences of drinking alcohol on sexual behavior, and what they can do to control their own actions and potentially to influence the actions of their peers.</td>
</tr>
<tr>
<td>Materials:</td>
<td>None</td>
</tr>
<tr>
<td>Instructions:</td>
<td>Describe a scenario where teens are at a party where alcohol is available and many of the teens at the party are drinking, and some are drunk. One of the older teens at the party, Joe, approaches one of the younger girls, Lisa, and starts to flirt with her, offering her more alcohol, telling her how attractive she is, etc. Lisa, who is not used to drinking alcohol, laughs and enjoys the attention, but eventually becomes dizzy and says she needs to sit down. Joe puts his arm around Lisa and offers to take her into an upstairs bedroom to rest. Lisa, stumbling and unable to focus, leans on Joe and follows him upstairs. Lisa’s best friend, Maggie, and Lisa’s brother’s best friend, Ben, are at the party and see Joe taking Lisa upstairs. Ask the female participants what they would do if they were Maggie. Ask the male participants what they would do if they were Ben. Note: It is best to use names that don’t belong to any of the participants. Substitute different names in the scenario where appropriate.</td>
</tr>
</tbody>
</table>

### Activity: Pregnant Drinking

<table>
<thead>
<tr>
<th>Time:</th>
<th>10-20 minutes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Purpose:</td>
<td>To consider and discuss the consequences of drinking while pregnant and what role teens can play in influencing each other’s behavior.</td>
</tr>
<tr>
<td>Materials:</td>
<td>None</td>
</tr>
<tr>
<td>Instructions:</td>
<td>Describe the following scenario: Jenny is 15 years old and had her first sexual experience with Jason a month ago Saturday. Jenny found out this morning that she is pregnant and she told Jason this afternoon after school – she also told her best friend, Eileen. Upset and unsure what to do, Jenny races home and begins drinking beer that is in her parents’ refrigerator. By the time Jason and Eileen arrive at Jenny’s home to check on her, she has had 2 beers and is starting to drink a third. Ask the female participants what they would do if they were Eileen. Ask the male participants what they would do if they were Jason. Note: It is best to use names that don’t belong to any of the participants. Substitute different names in the scenario where appropriate.</td>
</tr>
</tbody>
</table>
Segment 2, Topic 1 TRUTH and CONSEQUENCES: Alcohol

PRE-TEST/POST-TEST

Instructions:
Presenter distributes to participants before session begins and then provides correct answers at the end. The test is not collected and not graded – it is a self-assessment for participants.

1. People who begin drinking in their teens are much more likely to become addicted than those who begin at 21.
   ___ True
   ___ False
   ___ Not sure

2. Drinking alcohol can lead to: (check all that apply)
   ___ Loss of coordination
   ___ Poor judgment
   ___ Memory lapses
   ___ All of the above
   ___ Not sure

3. Teens who use alcohol are 7 times more likely to have sex than those who don’t.
   ___ True
   ___ False
   ___ Not sure

4. Alcohol can kill you:
   ___ True
   ___ False
   ___ Not sure

5. Babies born to mothers who drank alcohol during pregnancy may: (check all that apply)
   ___ Weigh less than babies born to mothers who didn’t drink
   ___ Be born with birth defects
   ___ Have problems eating and sleeping
   ___ Have problems hearing and seeing
   ___ All of the above
   ___ Not sure

6. What I hope to learn (pre-test) or what I did learn (post-test) from the session:
____________________________________________________________________________________________
____________________________________________________________________________________________
Segment 2, Topic 1 TRUTH and CONSEQUENCES: Alcohol

PRE-TEST/POST-TEST ANSWERS

1. True
2. All of the above
3. True
4. True
5. All of the above
6. Open response
Segment 2, Topic 1 TRUTH and CONSEQUENCES: Alcohol

HANDOUT

**Key Messages**

Drinking alcohol affects your brain, your body, and your self-control:

- Can lead to loss of coordination, poor judgment, memory lapses, and even blackouts.
- Can lead to risky behaviors, such as driving when you shouldn’t, or having unprotected sex. Teens who use alcohol are 7 times more likely to have sex than those who don’t.
- People who begin drinking in their teens are much more likely to become addicted than those who begin at 21.

Alcohol can kill you:

- Drinking large amounts of alcohol at one time or very rapidly can cause alcohol poisoning, which can lead to coma or even death.
- Driving and drinking can be deadly.
- Alcohol is the leading cause of death in people under 21.

Alcohol Consumed During Pregnancy Hurts Babies:

- Alcohol during pregnancy increases the risk of miscarriage, low birthweight, stillbirth, and birth defects.
- When a pregnant woman drinks, alcohol passes swiftly through the placenta to her baby.
- Fetal Alcohol Syndrome (FAS) is one of the most common known causes of mental retardation, and the only cause that is entirely preventable.

**Take Away**

I won’t let alcohol ruin my life. I will:

- Refuse get in the car of a driver who has been drinking.
- Decline alcohol when it is offered to me.
- Advise my friends to avoid alcohol, and watch out for friends who have been drinking.
- Find other outlets for fun, stress release, and relaxation.
- Find out more about the effects of alcohol on myself and/or on others.

**Want More Information?**

National Campaign to Prevent Teen Pregnancy:  
“Sobering Facts on Alcohol and Teen Pregnancy”  
[teenpregnancy.org](http://teenpregnancy.org)

Students Against Destructive Decisions (SADD)  
[SADD.org](http://sadd.org)

Alcohol Quit Line  
1-800-ALCOHOL (1-800-252-6465)
Segment 2, Topic 2 TRUTH and CONSEQUENCES: Smoking

KEY MESSAGES

Who Smokes?

• Every day, thousands of teens try a cigarette for the first time.
• Every day, hundreds of youth become smokers.
• Young people become addicted to smoking more easily than adults.
• Two-thirds of high school smokers say they want to quit.
• As many as 1 in 4 men smoke.
• As many as 1 in 5 pregnant women smoke.
• Approximately 90 percent of smokers begin smoking before the age of 21.

Smoking Kills

• Millions of people are sick with diseases caused by smoking.
• At least 7 die every minute from a smoking-related illness.
• Tobacco kills more Americans than AIDS, drugs, homicide, fires, and auto accidents – combined.
• Cigarette smoke contains more than 4,800 chemicals, 69 of which are known to cause cancer.

Secondhand Smoke Makes People Sick

• Secondhand smoke puts others at risk for cancer, respiratory illness, asthma, infections, and impaired lung function.
• In the US, thousands of people die each year from secondhand-smoke-related disease.
• Secondhand smoke is as harmful to babies and young children as if they were smoking the cigarette themselves

Smoking Leads to Reduced Fertility

• A male who smokes more than 1 cigarette a day risks a decrease in sperm count, density, mobility, and production.
• Chewing tobacco is as dangerous as smoking. One chew contains 15 times the nicotine of a cigarette.
• Women who smoke can have a difficult time becoming pregnant.

Smoking During Pregnancy Hurts Babies

• Nicotine and carbon monoxide [ingredients of cigarettes] reduce the supply of oxygen to the baby.
• Smoking during and after pregnancy increases risk for Sudden Infant Death Syndrome (SIDS) by 3-fold
• Smoking during pregnancy results in hundreds of infant deaths each year.
• Pregnant smokers compared to nonsmokers are more likely to experience miscarriage, stillbirth, early rupture of membranes, growth restriction, and birth defects
How to Get Help

• Discuss your concerns with a friend, parent, or health care professional.
• Ask your family and friends to help you stay away from cigarettes and tobacco.
• Avoid situations where smoking is encouraged.
• Seek help from a school nurse, community health clinic, or your doctor.
• Call the American Cancer Society Quit Line: 1-800-227-2345

Note to Presenters
See additional information in the Chapter, “Self Esteem, Peer Pressure, and Stress Management.”

Sources of Data for this Chapter
American Legacy Foundation  americanlegacy.org
Campaign for Tobacco-Free Kids  tobacconfreekids.org
Kick Butts Day  kickbuttsday.org
March of Dimes  marchofdimes.com
March of Dimes Team Youth  marchofdimes.com/youth
Smoke Free Families  smokefreefamilies.org
Youth Action  tobacconfreekids.org/youthaction

References for Teens
American Cancer Society Quit Line  1-800-227-2345
Kick Butts Day  kickbuttsday.org
March of Dimes Team Youth  marchofdimes.com/youth
truth® (youth smoking prevention campaign)  theTruth.com
Youth Action  tobacconfreekids.org/youthaction

References for Parents and Professionals
American Legacy Foundation  americanlegacy.org
Campaign for Tobacco-Free Kids  tobacconfreekids.org
March of Dimes (for parents and professionals)  marchofdimes.com
Nacersano (Spanish)  nacersano.org
Smoke Free Families  smokefreefamilies.org
Segment 2, Topic 2 TRUTH and CONSEQUENCES: Smoking

EXCERPTS FROM VIDEO

Dresdner: People say that smoking has gone down but, in my personal opinion, it has actually stayed the same.

1. How many people do you know who smoke?
2. Do you know anyone who has recently quit, or tried to?
3. Name some reasons for why a teen might start smoking.
4. Name some reasons for why a teen might quit smoking.
5. How do you feel about smoking – does it bother you?

Dr Damus: It takes a lot less exposure for a young person to become addicted than it does for an adult.

1. What does addiction mean?
2. Are you addicted to anything?
3. Why do you suppose a young person is more likely to become addicted to smoking than an adult?
4. Have you ever tried to quit something you once enjoyed? What was it like?
5. What are some ways to quit smoking?

Dr Campbell: The effect of smoking on pregnancy is similar to the effect of illegal drugs: babies tend to be smaller, lighter at birth, and have smaller heads. And this can persist.

1. Have you ever seen a pregnant woman smoking?
2. Without using names, do you know any pregnant women who smoke?
3. What can a baby do to protect itself from the smoke its mother inhales?
4. What can a teen do to protect him or herself against secondhand smoke?
5. Have you ever been annoyed by another person’s smoke?
# Activity: What Does a Smoker Look Like?

| Time: | 10-20 minutes |
| Purpose: | To encourage participants to visualize and then depict the effects of smoking on the body in a fun, and potentially humorous way that draws attention to the specific consequences of smoking that are most significant to them. |
| Materials: | Paper and pens or pencils |
| Instructions: | Distribute at least 2 pieces of paper and pens or pencils to each participant. Ask that each participant draw a picture of a smoker and then a non-smoker on same or separate sheets of paper. Then have participants pair up and exchange pictures with their partner. Give the partners a chance to describe their picture and what features they intended to draw. Have the partners hold up and describe the pictures to the rest of the participants, trying to accurately describe what the artist intended. |

# Activity: Marketing Madness

<p>| Time: | 15-30 minutes |
| Purpose: | To encourage participants to become aware of and to evaluate how tobacco companies try to influence their behavior by encouraging them to use their products. |
| Materials: | Tobacco ads clipped from magazines, Web sites, newspapers, etc. |
| Instructions: | Distribute or display the ads to the participants. One ad at a time, ask participants to describe what message the ad is trying to convey. Who is the target audience in terms of age, gender, and lifestyle? Is the ad appealing or convincing? Who do they think would be influenced to buy the product after seeing this ad? After all ads have been displayed and discussed, ask participants to assign the following three awards to the most deserving ad or ads: (1) Worst Ad for Kids Award; (2) Worst Ad for Adults Award; and (3) Most Deceptive Marketing Award. More than 1 award can be assigned to an ad. |</p>
<table>
<thead>
<tr>
<th>Activity: Nick Nicotine and Healthy Helen Debate</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Time:</strong></td>
</tr>
<tr>
<td><strong>Purpose:</strong></td>
</tr>
<tr>
<td><strong>Materials:</strong></td>
</tr>
</tbody>
</table>
| **Instructions:** | Select a participant to play the role of Nick Nicotine, a fan of smoking who claims to have had his first cigarette before he was born (secondhand), when he was in his mother’s womb. Nick works for a tobacco company and thinks that all kids should smoke. Ask Nick to identify 2 other participants to join his team. [Vary the name to Nicki Nicotine, if a female will play the role – or chose another N name if there is someone named Nick or Nicki among the participants (eg, Norman, Nancy, Nemo)]

Select another participant to play the role of Healthy Helen, an anti-smoking activist who plays all sports, sings for her church choir, and recently won the Miss Beautiful Complexion Award by her peers. Helen thinks that cigarette smoking and chewing tobacco should be illegal. Ask Helen to identify 2 other participants to join her team. [Vary the name to Healthy Hal, if a male will play the role – or chose another H name if someone named Helen or Hal is among the participants (eg, Harriet, Harold, Honey)]

Explain the procedures of debate. Nick and Helen will each be allowed 3 minutes for their opening statement and then 2 minutes for rebuttal up to a maximum of 3 rebuttals each. A coin will be flipped to decide who speaks first. Interruptions during opening statements and/or rebuttals will be discouraged with a gong. After three gongs and the other side of the debate automatically wins.

Allow Nick and Helen 5 minutes to confer with their 2 teammates to prepare their opening statement. Each of the 2 teammates can be consulted only once during the debate, if needed.

While Nick and Helen are preparing, explain to the rest of the participants, the “Audience”, that they will be witnessing a debate and then asked to vote on which debater was the most compelling. Have the Audience prepare to take notes paying attention to when either of the debaters presents information that is not correct or that seems unlikely to be true. One of the Audience should be assigned to “gong” the debaters if they break the rules and interrupt more than once. Another Audience member should be assigned to keep track of time for opening statements and rebuttals, providing 30 second warnings before time is up.
Instructions:

Presenter distributes to participants before session begins and then provides correct answers at the end. The test is not collected and not graded – it is a self-assessment for participants.

1. Teens who smoke are more likely to become addicted than adults
   ___ True
   ___ False
   ___ Not sure

2. Every day, _____ of teens try a cigarette for the first time.
   ___ Hundreds
   ___ Thousands
   ___ Millions
   ___ Not sure

3. In the US, _____ of people are sick with diseases caused by smoking.
   ___ Hundreds
   ___ Thousands
   ___ Millions
   ___ Not sure

4. Tobacco kills ___ Americans than AIDS, drugs, homicide, fires, and auto accidents combined.
   ___ More
   ___ Less
   ___ About the same
   ___ Not sure

5. Babies whose mothers smoked during pregnancy are more likely to: (check all that apply)
   ___ Die from sudden infant death syndrome (sids)
   ___ Be low birth weight
   ___ Be premature
   ___ Be born with birth defects
   ___ All of the above
   ___ Not sure

6. What I hope to learn (pre-test) or what I did learn (post-test) from the session:

____________________________________________________________________________________________
Segment 2, Topic 2 TRUTH and CONSEQUENCES: Smoking

PRE-TEST/POST-TEST ANSWERS

1. True
2. Thousands
3. Millions
4. More
5. All of the above
6. Open response
Segment 2, Topic 2

TRUTH and CONSEQUENCES: Smoking

HANDOUT

Key Messages

Who Smokes?

• Every day, thousands of teens try a cigarette for the first time. Every day, hundreds of youth become smokers. Young people become addicted to smoking more easily than adults.

Smoking Kills

• Millions of people are sick with diseases caused by smoking – and more than 7 die every minute. Tobacco kills more Americans than AIDS, drugs, homicide, fires, and auto accidents – combined.

Secondhand Smoke Makes People Sick

• Secondhand smoke puts others at risk for cancer, respiratory illness, asthma, infections, and impaired lung function.

Smoking During Pregnancy Hurts Babies

• Nicotine and carbon monoxide [ingredients of cigarettes] reduce the supply of oxygen to the baby. Pregnant smokers compared to nonsmokers are more likely to experience miscarriage, stillbirth, early rupture of membranes, growth restriction, and birth defects.

Take Away

I won’t let tobacco ruin my health. I will:

__ Refuse to smoke cigarettes or chew tobacco.
__ Advise my friends and family to avoid smoking, explaining the health risks.
__ Ask friends and family members not to smoke around me.
__ Join the Kick Butts Campaign (visit: kickbuttsday.org)
__ Join The Campaign for Tobacco-Free Kids (the Campaign recognizes youth advocates each year with scholarships and grants – visit: tobaccofreekids.org/youthaction)

Want More Information?

American Cancer Society Quit Line 1-800-227-2345
Kick Butts Day kickbuttsday.org
March of Dimes Team Youth marchofdimes.com/youth
truth® (youth smoking prevention campaign) theTruth.com
Youth Action tobaccofreekids.org/youthaction
Segment 2, Topic 3 **TRUTH and CONSEQUENCES: Drugs**

**KEY MESSAGES**

**Teens and Drug Use**
- Teens who use drugs are more likely than non-users to think about committing suicide.
- Dependence on alcohol and other drugs is associated with severe psychiatric problems such as depression and anxiety.
- The earlier you start using drugs, the more likely you are to become addicted.
- Teens who use drugs are more likely to have or cause an unplanned pregnancy.
- If you’re drunk or high, you can’t make good decisions about sex.

**Just Say No**
- Just because you think everyone is doing it, doesn’t mean they are. Some are, some aren’t and some are lying.
- You can always say NO even if you’ve said YES before.

**Reasons Why Teens Use Drugs**
- Relieve boredom
- Feel good
- Forget their troubles and relax
- Have fun
- Satisfy their curiosity
- Take risks
- Ease pain
- Feel grown-up
- Show their independence
- Belong to a specific group and look cool

**Common Drugs of Abuse in Adolescence**
- Marijuana (Weed, pot, reefer, grass, dope, ganja, etc)
- Inhalants (Laughing gas, whippets, aerosol sprays, cleaning fluids, solvents)
- Prescription Drugs (Vicodin, Oxycontin, Xanax, Ritalin)
- Ecstasy (XTC, X, Adam, MDMA)
- Cocaine (Coke, snow, nose candy, flake, blow, big C, lady, white, snowbirds)
- Crack (Rock, freebase)
• Designer Drugs (Synthetic heroin, goodfella)
• Heroin (Smack, horse, mud, brown, sugar, junk, black tar, big H, dope)
• Methamphetamine (Speed, meth, crank, crystal, ice, fire, glass, etc)

Marijuana: Most Commonly-used Illegal Drug
• About half of US teenagers try marijuana before finishing high school
• Short Term Effects: Distorted view of reality, short term memory loss, difficulty thinking and solving problems, increased appetite
• Long Term Effects: Compulsive and long-term marijuana use may lead to loss of personal motivation, decreased ability to concentrate, and may cause lung damage
• Legal problems associated with marijuana use and possession could cost you your college education and your future.

Inhalants: Most Commonly Used Drugs Among the Youngest Adolescents
• Breathable chemical vapors that users intentionally inhale because of the chemicals’ mind-altering effects. The substances inhaled are often common household products that contain volatile solvents or aerosols.
• Substances Include: Glue, nail polish remover, gasoline, solvents, butane, whipped cream dispensers, markers
• Sudden Sniffing Death: Heart failure and death within minutes of sniffing. Can occur after a single sniffing session. Can happen to an otherwise healthy person
• Long-term use of inhalants can cause hearing loss, brain damage, liver and kidney damage, and permanent limb spasms

Prescription Drug Abuse: Any Prescription Medication Taken for Non-medical Reasons
• Prescription drug abuse among teens has tripled since 1992.
• More Americans abuse prescription drugs than abuse heroin, cocaine, hallucinogens, and inhalants combined.
• Commonly Abused Prescription Drugs Include: Valium, Ritalin, Xanax, Dexadrine, Lomotil, Demerol, Oxycontin, and more
• If you take a medicine than is not prescribed to you or in a way other than it was intended, you are abusing drugs.
• Abusing prescription drugs can lead to addiction, illness, and death.
• Abusing prescription drugs is illegal.

For more information about specific drugs and their effects, see the chart at the end of this Section, Commonly Abused Drugs.
Substance Abuse and Pregnancy

- Substance abuse during pregnancy can cause a baby to have mental retardation, learning and attention problems, birth defects, and the baby can suffer withdrawal after it is born.
- Substance abuse can also cause a baby to be born preterm or low birth weight. It also may cause miscarriage.
- Nearly 3 percent of pregnant women use illegal drugs such as cocaine, methamphetamine, and heroin during their pregnancies.
- Babies exposed to cocaine before they are born may start life with serious health problems. Cocaine use in early pregnancy appears to increase the risk of certain birth defects and miscarriage.
- Babies who are regularly exposed to cocaine in utero sometimes have feeding difficulties and sleep disturbances. As newborns, some are jittery and irritable, and they may startle and cry at the gentlest touch or sound.
- Babies born to mothers who used drugs while pregnant may start life with serious health problems. Drug use hurts babies.

How to Get Help

- Discuss your concerns with a friend, parent, or health care professional.
- Ask your family and friends to help you stay away from drugs.
- Avoid situations where using drugs is encouraged.
- Seek help from a school nurse, community health clinic, or your doctor.
- Call the Drugs Quit Line: 1-800-662-HELP (1-800-662-4357)

Note to Presenters
See additional information in the Chapter, “Self Esteem, Peer Pressure, and Stress Management.”

Sources of Data for this Chapter
Kaiser Family Foundation kff.org
March of Dimes marchofdimes.com/
March of Dimes Team Youth marchofdimes.com/youth
National Campaign to Prevent Teen Pregnancy: “Sex and Drugs” teenpregnancy.org
National Center on Addiction and Substance Abuse at Columbia University casacolumbia.org
The National Institute on Drug Abuse (NIDA) www.drugabuse.gov
National Youth Anti-Drug Media Campaign (for parents) theantidrug.com
Substance Abuse and Mental Health Services Administration www.samhsa.gov
References for Teens
Drugs Quit Line: 1-800-662-HELP
March of Dimes Team Youth
National Campaign to Prevent Teen Pregnancy: “Sex and Drugs”
NIDA for Teens
National Youth Anti-Drug Media Campaign (for youth)

References for Parents and Professionals
Association of Women’s Health, Obstetric and Neonatal Nurses
Kaiser Family Foundation
March of Dimes (for parents and professionals)
Nacersano (Spanish)
National Campaign to Prevent Teen Pregnancy: “Sex and Drugs”
National Center on Addiction and Substance Abuse at Columbia University
The National Institute on Drug Abuse (NIDA)
National Youth Anti-Drug Media Campaign (for parents)
Substance Abuse and Mental Health Services Administration
Segment 2, Topic 3  TRUTH and CONSEQUENCES: Drugs

EXCERPTS FROM VIDEO

Chandler, 8th Grader: At my school two of my best friends got kicked out for having marijuana.

Shawn: When I was partying my grades went down...if you’re high, you’re not going to be able to concentrate; your mind is not working 100 percent.

Fantasia: When someone encourages you to just try a drug, you may think you are just trying but often one try leads to an addiction.

Tyler: What you don’t realize is that it is gradually taking its toll on your body, leading you farther and farther down into a depression, and you’re eventually making choices that you really don’t want to make.

1. Chandler, Shawn, Fantasia, and Tyler all speak about some of the consequences of doing drugs. What are some other consequences of doing drugs that impact teens?

2. Tyler speaks about depression and bad choices. What does it mean to be depressed?

3. Some drugs are more common than others. What drugs are you aware of that are being used at your school or in the community where you live?

4. What are some of the reasons teens do drugs?

5. Given the reasons teens do drugs, what are some alternatives to doing drugs that might satisfy the same needs or goals?

Shannon: Some people will look highly upon you if you don’t do the drugs.

Shawn: You can’t just think about what’s going to happen in the moment. You have to think long term, like what’s going to happen after – in the future.

1. Do you agree with Shannon that your friends may look highly upon you if you don’t do drugs?

2. What are some ways to say “no” to drugs?

3. How would you feel if a friend rejected you for saying “no” to doing drugs?

4. What is an addiction? Without mentioning them by name, do you know people who can’t say “no” to drugs – who you would describe as addicted?

5. Shawn says it’s important to think about the future. How do you think doing drugs might interfere with your long term goals (what you hope to be doing 5-10 years from now)?
Kat: Staying away from drugs and alcohol now can help you stay away from them in the future, which means you are more likely to have a healthy baby when you want to.

1. Do you expect to have a family someday? If so, when?
2. Why does taking care of your body now matter for the future?
3. How can using drugs now affect the baby you may have in the future – or that your partner may have?
4. How do the drugs a pregnant woman takes impact her baby?
5. Can drugs kill you? How?
Segment 2, Topic 3 TRUTH and CONSEQUENCES: Drugs

ACTIVITIES: DRUGS

Activity: Let’s Party

**Time:** 5-15 minutes

**Purpose:** To role play and practice decision-making skills when offered drugs.

**Materials:** None

**Instructions:** Describe the following scenario: Alice is interested in Max and has been invited, along with her friend Betty, to his house for a party. When they get there, the house is filled with older kids that Alice and Betty haven’t met before, as well as kids that they know. They go over to talk to the friend they know. Max, noticing Alice has arrived, comes over to say hello and then brings her into another room to introduce her to his friends who she has never seen before. Max’s friends in the other room are all sharing a joint. They pass the joint to Alice.

Female Participants: Imagine you are Alice – what would you do as the joint is passed to you? What would you do if you were Betty?

Male Participants: After females reply above, imagine you are Max – how would you respond to Alice’s decision.

**Note:** It is best to use names that don’t belong to any of the participants. Substitute different names in the scenario where appropriate.

Activity: Guess the Drug

**Time:** 15-30 minutes

**Purpose:** To introduce participants to the effects of different drugs in an amusing, interactive way.

**Materials:** A photocopy of the “Commonly Abused Drugs” chart of information provided at the end of this Section cut into 17 pieces so that each of the 17 drugs described is on a single piece of paper. Make more than 1 copy of the chart if there are more than 17 participants in your group.

**Instructions:** Distribute a drug description to each participant. Give participants a couple minutes to read about the drug privately, without sharing the information with any of the other participants. Call on participants to come to the front of the room to act out, without using words or props, what a person who is using that drug would look like.

**Note to Presenters:** Assess your audience to ensure that this activity does not further intrigue your audience and potentially increase interest in the drugs discussed.
### Activity: In the News

<table>
<thead>
<tr>
<th><strong>Time:</strong></th>
<th>20-45 minutes</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Purpose:</strong></td>
<td>To encourage participants to think about the legal consequences of criminal drug use through role play.</td>
</tr>
<tr>
<td><strong>Materials:</strong></td>
<td>Copies of local newspapers and magazines – identify ones that include information about celebrities and drug use and/or criminal activities surrounding drugs.</td>
</tr>
</tbody>
</table>
| **Instructions:** | Divide the participants into groups of 5. Provide a magazine or newspaper to each group and ask them to find a story related to drug use and explain that the story they find will be the basis for a mini trial that they will act out.  

Ask each group to identify one person who will serve as the Prosecutor and another person who will serve as the Defense Attorney. The 3 other members of the group may serve as actors or props (if only one person is involved in the story’s crime, have the others play imagined roles such as of the person’s parents or children, or someone who might be affected by the crime).  

Have each group portray the story they have located – first, the 3 actors should display the drug-related criminal activity reported in the story. Then, the Prosecutor should state why the accused is guilty and what the punishment should be for the crime. Finally, the Defense Attorney should attempt to defend the criminal activity. Have all other participants watching the scenarios act as the Jury and decide to convict or exonerate the accused. |
### COMMONLY ABUSED DRUGS

From The National Institute on Drug Abuse (NIDA), 2004.  
http://www.drugabuse.gov/DrugPages/DrugsofAbuse.html

<table>
<thead>
<tr>
<th>Substance: Category and Name</th>
<th>Examples of Commercial and Street Names</th>
<th>DEA Schedule*/How Administered**</th>
<th>Intoxication Effects/Potential Health Consequences</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Cannabinoids</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>hashish</td>
<td>boom, chronic, gangster, hash, hash oil, hemp</td>
<td>I/ swallowed, smoked</td>
<td>euphoria, slowed thinking and reaction time, confusion, impaired balance and coordination/cough, frequent respiratory infections; impaired memory and learning; increased heart rate, anxiety; panic attacks; tolerance, addiction</td>
</tr>
<tr>
<td>marijuana</td>
<td>blunt, dope, ganja, grass, herb, joints, Mary Jane, pot, reefer, sinsemilla, skunk, weed</td>
<td>I/ swallowed, smoked</td>
<td></td>
</tr>
<tr>
<td><strong>Depressants</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>barbiturates</td>
<td>Amytal, Nembutal, Seconal, Phenobarbital; barbs, reds, red birds, phennies, tooies, yellows, yellow jackets</td>
<td>II, III, V/ injected, swallowed</td>
<td>reduced anxiety; feeling of well-being; lowered inhibitions; slowed pulse and breathing; lowered blood pressure; poor concentration/fatigue; confusion; impaired coordination, memory, judgment; addiction; respiratory depression and arrest, death</td>
</tr>
<tr>
<td>benzodiazepines (other than flunitrazepam)</td>
<td>Ativan, Halcion, Librium, Valium, Xanax; candy, downers, sleeping pills, tranks</td>
<td>IV/ swallowed, injected</td>
<td>Also, for barbiturates—sedation, drowsiness/depression, unusual excitement, fever, irritability, poor judgment, slurred speech, dizziness, life-threatening withdrawal.</td>
</tr>
<tr>
<td>flunitrazepam***</td>
<td>Rohypnol; forget-me pill, Mexican Valium, R2, Roche, roofies, roofinol, rope, rophies</td>
<td>IV/ swallowed, snorted</td>
<td>for benzodiazepines—sedation, drowsiness/dizziness</td>
</tr>
<tr>
<td>GHB***</td>
<td>gamma-hydroxybutyrate; G, Georgia home boy, grievous bodily harm, liquid ecstasy</td>
<td>I/ swallowed</td>
<td>for flunitrazepam—visual and gastrointestinal disturbances, urinary retention, memory loss for the time under the drug’s effects</td>
</tr>
<tr>
<td>methaqualone</td>
<td>Quaalude, Sopor, Parest; ludes, mandrex, quad, quay</td>
<td>I/injected swallowed</td>
<td>for GHB—drowsiness, nausea/vomiting, headache, loss of consciousness, loss of reflexes, seizures, coma, death</td>
</tr>
<tr>
<td><strong>Dissociative Anesthetics</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>ketamine</td>
<td>Ketalar SV; cat Valiums, K, Special K, vitamin K</td>
<td>III/ injected, snorted, smoked</td>
<td>increased heart rate and blood pressure, impaired motor function/memory loss; numbness; nausea/vomiting</td>
</tr>
<tr>
<td>PCP and analogs</td>
<td>phencyclidine; angel dust, boat, hog, love boat, peace pill</td>
<td>I, II/ injected, swallowed, smoked</td>
<td>Also, for ketamine—at high doses, delirium, depression, respiratory depression and arrest</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>for PCP and analogs—possible decrease in blood pressure and heart rate, panic, aggression, violence/loss of appetite, depression</td>
</tr>
<tr>
<td>Substance: Category and Name</td>
<td>Examples of Commercial and Street Names</td>
<td>DEA Schedule*/ How Administered**</td>
<td>Intoxication Effects/Potential Health Consequences</td>
</tr>
<tr>
<td>-----------------------------</td>
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</tr>
<tr>
<td><strong>Stimulants</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>amphetamine</td>
<td>Biphetamine, Dexedrine; bennies, black beauties, crosses, hearts, LA turnaround, speed, truck drivers, uppers</td>
<td>II/ injected, swallowed, smoked, snorted</td>
<td>increased heart rate, blood pressure, metabolism; feelings of exhilaration, energy, increased mental alertness/ rapid or irregular heart beat; reduced appetite, weight loss, heart failure, nervousness, insomnia</td>
</tr>
<tr>
<td>cocaine</td>
<td>Cocaine hydrochloride; blow, bump, C, candy, Charlie, coke, crack, flake, rock, snow, toot</td>
<td>II/ injected, smoked, snorted</td>
<td>Also, for amphetamine—rapid breathing/tremor, loss of coordination; irritability, anxiousness, restlessness, delirium, panic, paranoia, impulsive behavior, aggressiveness, tolerance, addiction, psychosis</td>
</tr>
<tr>
<td>MDMA (methylenedioxy- methamphetamine)</td>
<td>Adam, clarity, ecstasy, Eve, lover’s speed, peace, STP, X, XTC</td>
<td>I/ swallowed</td>
<td>for cocaine—increased temperature/chest pain, respiratory failure, nausea, abdominal pain, strokes, seizures, headaches, malnutrition, panic attacks</td>
</tr>
<tr>
<td>methamphetamine</td>
<td>Desoxyn; chalk, crank, crystal, fire, glass, go fast, ice, meth, speed</td>
<td>II/ injected, swallowed, smoked, snorted</td>
<td>for MDMA—mild hallucinogenic effects, increased tactile sensitivity, empathic feelings/impaired memory and learning, hyperthermia, cardiac toxicity, renal failure, liver toxicity</td>
</tr>
<tr>
<td>methylphenidate (safe and effective for treatment of ADHD)</td>
<td>Ritalin; JIF, MPH, R-ball, Skippy, the smart drug, vitamin R</td>
<td>II/ injected, swallowed, snorted</td>
<td>for methamphetamine—aggression, violence, psychotic behavior/memory loss, cardiac and neurological damage; impaired memory and learning, tolerance, addiction</td>
</tr>
<tr>
<td>nicotine</td>
<td>cigarettes, cigars, smokeless tobacco, snuff, spit tobacco, bidis, chew</td>
<td>not scheduled/ smoked, snorted, taken in snuff and spit tobacco</td>
<td>for nicotine—additional effects attributable to tobacco exposure, adverse pregnancy outcomes, chronic lung disease, cardiovascular disease, stroke, cancer, tolerance, addiction</td>
</tr>
<tr>
<td><strong>Other Compounds</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>anabolic steroids</td>
<td>Anadrol, Oxandrin, Durabolin, Depo- Testosterone, Eqiupoise; roids, juice</td>
<td>III/ injected, swallowed, applied to skin</td>
<td>no intoxication effects/hypertension, blood clotting and cholesterol changes, liver cysts and cancer, kidney cancer, hostility and aggression, acne; in adolescents, premature stoppage of growth; in males, prostate cancer, reduced sperm production, shrunken testicles, breast enlargement; in females, menstrual irregularities, development of beard and other masculine characteristics</td>
</tr>
<tr>
<td>inhalants</td>
<td>Solvents (paint thinners, gasoline, gases), gases (butane, propane, aerosol propellants, nitrous oxide), nitrites (isobutyl, isopropyl, cyclohexyl); laughing gas, poppers, snappers, whippets</td>
<td>not scheduled/ inhaled through nose or mouth</td>
<td>stimulation, loss of inhibition; headache; nausea or vomiting; slurred speech, loss of motor coordination; wheezing/ unconsciousness, cramps, weight loss, muscle weakness, depression, memory impairment, damage to cardiovascular and nervous systems, sudden death</td>
</tr>
</tbody>
</table>
### Hallucinogens

<table>
<thead>
<tr>
<th>Substance: Category and Name</th>
<th>Examples of Commercial and Street Names</th>
<th>DEA Schedule*/How Administered**</th>
<th>Intoxication Effects/Potential Health Consequences</th>
</tr>
</thead>
<tbody>
<tr>
<td>LSD</td>
<td>lysergic acid diethylamide; acid, blotter, boomers, cubes, microdot, yellow sunshines</td>
<td>I/ swallowed, absorbed through mouth tissues</td>
<td>altered states of perception and feeling; nausea; persisting perception disorder (flashbacks) Also, for LSD and mescaline—increased body temperature, heart rate, blood pressure; loss of appetite, sleeplessness, numbness, weakness, tremors for LSD—persistent mental disorders for psilocybin—nervousness, paranoia</td>
</tr>
<tr>
<td>mescaline</td>
<td>buttons, cactus, mesc, peyote</td>
<td>I/ swallowed, smoked</td>
<td>for LSD—persistent mental disorders for psilocybin—nervousness, paranoia</td>
</tr>
<tr>
<td>psilocybin</td>
<td>magic mushroom, purple passion, shrooms</td>
<td>I/ swallowed</td>
<td></td>
</tr>
</tbody>
</table>

### Opioids and Morphine Derivatives

<table>
<thead>
<tr>
<th>Substance: Category and Name</th>
<th>Examples of Commercial and Street Names</th>
<th>DEA Schedule*/How Administered**</th>
<th>Intoxication Effects/Potential Health Consequences</th>
</tr>
</thead>
<tbody>
<tr>
<td>codeine</td>
<td>Empirin with Codeine, Fiorinal with Codeine, Robitussin A-C, Tylenol with Codeine; Captain Cody, Cody, schoolboy; (with glutethimide) doors &amp; fours, loads, pancakes and syrup</td>
<td>II, III, IV/ injected, swallowed</td>
<td>pain relief, euphoria, drowsiness/nausea, constipation, confusion, sedation, respiratory depression and arrest, tolerance, addiction, unconsciousness, coma, death Also, for codeine—less analgesia, sedation, and respiratory depression than morphine for heroin—staggering gait</td>
</tr>
<tr>
<td>fentanyl and fentanyl analogs</td>
<td>Actiq, Duragesic, Sublimaze; Apache, China girl, China white, dance fever, friend, goodfella, jackpot, murder 8, TNT, Tango and Cash</td>
<td>I, II/ injected, smoked, snorted</td>
<td></td>
</tr>
<tr>
<td>heroin</td>
<td>diacetylmorphine; brown sugar, dope, H, horse, junk, skag, skunk, smack, white horse</td>
<td>I/ injected, smoked, snorted</td>
<td></td>
</tr>
<tr>
<td>morphine</td>
<td>Roxanol, Duramorph; M, Miss Emma, monkey, white stuff</td>
<td>II, III, IV/ injected, swallowed, smoked</td>
<td></td>
</tr>
<tr>
<td>opium</td>
<td>laudanum, paregoric; big O, black stuff, block, gum, hop</td>
<td>II, III, V/swallowed, smoked</td>
<td></td>
</tr>
<tr>
<td>oxycodone HCL</td>
<td>Oxycontin; Oxy, O.C., killer</td>
<td>II/swallowed, snorted, injected</td>
<td></td>
</tr>
<tr>
<td>hydrocodone bitartrate, acetaminophen</td>
<td>Vicodin; vike, Watson-387</td>
<td>II/ swallowed</td>
<td></td>
</tr>
</tbody>
</table>

*Schedule I and II drugs have a high potential for abuse. They require greater storage security and have a quota on manufacturing, among other restrictions. Schedule I drugs are available for research only and have no approved medical use; Schedule II drugs are available only by prescription (unrefillable) and require a form for ordering. Schedule III and IV drugs are available by prescription, may have five refills in 6 months, and may be ordered orally. Most Schedule V drugs are available over the counter.

**Taking drugs by injection can increase the risk of infection through needle contamination with staphylococci, HIV, hepatitis, and other organisms.

***Associated with sexual assaults.
Segment 2, Topic 3 TRUTH and CONSEQUENCES: Drugs
PRE-TEST/POST-TEST

Instructions:

Presenter distributes to participants before session begins and then provides correct answers at the end. The test is not collected and not graded – it is a self-assessment for participants.

1. Teens who use drugs are more likely than non-users to think about committing suicide.
   ___ True
   ___ False
   ___ Not sure

2. Dependence on alcohol and other drugs is associated with: (check all that apply)
   ___ Good grades
   ___ Popularity
   ___ Athletic ability
   ___ Depression and anxiety
   ___ None of the above
   ___ Not sure

3. The earlier kids start using drugs, the more likely they are to become dependant later in life.
   ___ True
   ___ False
   ___ Not sure

4. Teens who use drugs are ____ likely to have or cause an unplanned pregnancy.
   ___ More
   ___ Less
   ___ Not sure

5. Substance abuse during pregnancy can cause a baby to: (check all that apply)
   ___ Have mental retardation
   ___ Suffer learning and attention problems
   ___ Be born with birth defects
   ___ Be born preterm
   ___ All of the above
   ___ Not sure

6. What I hope to learn (pre-test) or what I did learn (post-test) from the session:

____________________________________________________________________________________________
Segment 2, Topic 3 TRUTH and CONSEQUENCES: Drugs
PRE-TEST/POST-TEST ANSWERS

1. True
2. Depression and anxiety
3. True
4. More
5. All of the above
6. Open response
Key Messages

Teens and Drug Use

- Teens who use drugs are more likely than non-users to think about committing suicide.
- The earlier you start using drugs, the more likely you are to become addicted.
- Teens who use drugs are more likely to have or cause an unplanned pregnancy.
- If you’re drunk or high, you can’t make good decisions about sex.

Substance Abuse and Pregnancy

- Substance abuse during pregnancy can cause a baby to have mental retardation, learning and attention problems, birth defects, and the baby can suffer withdrawal after it is born.
- Substance abuse can also cause a baby to be born preterm or low birth weight. It also may cause miscarriage.
- Babies born to mothers who used drugs while pregnant may start life with serious health problems. Drug use hurts babies.

Take Away

I won’t let drugs ruin my life. I will:

- Refuse any illegal or harmful drugs that are offered to me.
- Avoid situations where drug use is encouraged.
- Advise my friends and family to avoid using drugs, explaining the health risks.
- Encourage a friend who uses drugs to get help, such as by referring him/her to the Drugs Quit Line: 1-800-662-HELP (1-800-662-4357)
- Get more information about drugs by checking out resources on the Internet, etc.

Want More Information?

- Drugs Quit Line 1-800-662-HELP (1-800-662-4357)
- National Campaign to Prevent Teen Pregnancy: “Sex and Drugs” teenpregnancy.org
- National Youth Anti-Drug Media Campaign freevibe.com